## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000055290

FILED Apr 23, 2009 Secretary of State

| Entity Nan                                  | ne: SUNSHIN   | IE PSYCHOLOGICAL SERVIC                              | ES INC.   |  |  |  |
|---|---|--|---|--|--|--|
| Current Principal Place of Business:        |   |  | New Principal Place                                     | New Principal Place of Business:             |  |  |
|   | INS AVENUE<br>CH, FL 33140                          |  |   |  |  |  |
| Current Mailing Address:                    |   |  | New Mailing Addres                                      | New Mailing Address:                         |  |  |
|   | INS AVENUE<br>CH, FL 33140                          |  |   |  |  |  |
| FEI Number:                                 | 20-0941313  | FEI Number Applied For ( )                           | FEI Number Not Applicable ( )                           | Certificate of Status Desired ( )            |  |  |
| Name and                                    | Address of C  | urrent Registered Agent:                             | Name and Address  | Name and Address of New Registered Agent:    |  |  |
| 11380 PRC                                   |   | NS NETWORK, INC.<br>RMS ROAD #221E<br>S, FL 33410 US | SANDROW, DAVID<br>4775 COLLINS AVE<br>MIAMI BEACH, FL 3 | 3140 US                                      |  |  |
| The above in the State                      |   | submits this statement for the p                     | ourpose of changing its register                        | ed office or registered agent, or both,      |  |  |
| SIGNATURE: DAVID SANDROW                    |   |  |   | 04/23/2009                                   |  |  |
|   | Electron  | ic Signature of Registered Age                       | ent   | Date   |  |  |
| Election Carr                               | npaign Financing                                    | Trust Fund Contribution ( ).                         |   |  |  |  |
| OFFICERS AND DIRECTORS:                     |   |  | ADDITIONS/CHANG   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D ()<br>SANDROW, DA<br>4775 COLLINS<br>MIAMI BEACH, | AVENUE #905  | Title:<br>Name:<br>Address:<br>City-St-Zip:             | () Change () Addition                        |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D ()<br>MAHROU SAND<br>4775 COLLINS<br>MIAMI BEACH, | AVENUE #905  | Title:<br>Name:<br>Address:<br>City-St-Zip:             | () Change () Addition                        |  |  |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

| D | 04/23/2009 |
|---|------------|
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